**Quality Check®** 

Org ID: 7852

# Accreditation Quality Report





Version: 9 Date: 12/22/2023 DBA: Tennova Healthcare, 7565 Dannaher Drive, Powell, TN

Welcome to the Joint Commission's Quality Report. We know how important reliable information is to you and your family when making health care decisions. This Quality Report will help you make the right decisions to meet your needs. Since 1951, the Joint Commission has been the national leader in setting standards for health care organizations. When a health care organization seeks accreditation, it demonstrates commitment to giving safe, high quality health care and to continually working to improve that care.

The Quality Report is only one way to determine whether a health care organization can meet your needs. Discuss this report with your doctor or with other professional acquaintances before making a care decision. In addition to the accreditation status of the organization, the Quality Report uses checks, pluses, and minuses in each of the following key areas to help you compare a health care organization with similar accredited organizations.

- National Patient Safety Goals safety guidelines that target the
  prevention of medical errors such as surgery on the wrong side of
  the body and safe medication use.
- National Quality Improvement Goals measures the care of patients with specific conditions such as heart failure or pregnancy.

Not all measures are relevant to or available for all types of health care organizations. The Joint Commission will add relevant measures of health care quality as more measures become available. Your comments are just as important to us. The content and format of the Quality Report will be updated from time to time based on changes in the health care industry and your suggestions. Please call Customer Service at 630-792-5800 or e-mail the Joint Commission at qualityreport@jointcommission.org with your comments and suggestions.

Symbol Key

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organization.

Not displayed

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This organization achieved the best

This organization's performance is better than the target range/value. This organization's performance is

similar to the target range/value. This organization's performance is worse than the target range/value. This Measure is not applicable for this

## Metro Knoxville HMA LLC

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# **Summary of Quality Information**

Accreditation Progr	rams Accreditation Decision	Effective Date	Last Full S Date	urvey Last On-Site Survey Date
Hospital	Accredited	5/6/2023	3/26/2021	5/5/2023
Laboratory	Accredited	9/23/2022	9/22/2022	9/22/2022

## Accreditation programs recognized by the Centers for Medicare and Medicaid Services (CMS)

Pathology and Clinical Laboratory

Hospital

F	ootr	iote	Key
			_

- The Measure or Measure Set was not reported.
- The Measure Set does not have an overall result.
- The number of patients is not enough for comparison purposes.
- 4. The measure meets the Privacy Disclosure Threshold rule.
- 5. The organization scored above 90% but was below most other organizations.
- 6. The Measure results are not statistically valid.
- 7. The Measure results are based on a sample of patients.
- 8. The number of months with Measure
- data is below the reporting requirement. The measure results are temporarily suppressed pending resubmission of
- 10. Test Measure: a measure being evaluated for reliability of the individual data elements or awaiting National Quality Forum Endorsement.

updated data.

- 11. There were no eligible patients that met the denominator criteria.
- 12. The measure rate is within optimal range.

For further information and explanation of the **Quality Report contents,** refer to the "Quality Report User Guide."

Advanced Certification Programs	<b>Certification Decision</b>	Effective Date	Last Full Review Date	v Last On-Site Review Date
Acute Stroke Ready Hospital	Certification	10/25/2023	10/24/2023	10/24/2023
Primary Stroke Center	Certification	11/3/2021	10/25/2023	10/25/2023
Certified Programs	<b>Certification Decision</b>	<b>Effective</b>	Last Full Review	v Last On-Site
		Date	Date	<b>Review Date</b>
Joint Replacement - Hip	Certification	8/26/2022	8/25/2022	8/25/2022
Joint Replacement - Knee	Certification	8/27/2022	8/26/2022	8/26/2022

#### **Other Accredited Programs/Services**

• Hospital ( Accredited by American College of Surgeons-Commission on Cancer (ACoS-COC))

		Compared to other Joint Commission Accredited Organizations		
		Nationwide	Statewide	
Hospital	2023National Patient Safety Goals	Ø	N/A *	
Reporting Period: Jan 2021 - Dec 2021	National Quality Improvement Goals:  Perinatal Care	(I) 2	(ID) 2	
Laboratory	2022National Patient Safety Goals	Ø	(VA) *	

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# **Locations of Care**

#### \* Primary Location

## Locations of Care

## Metro Knoxville HMA

DBA: North Knoxville Medical Center 7565 Dannaher Drive Powell, TN 37849

#### Available Services

#### **Joint Commission Advanced Certification Programs:**

• Primary Stroke Center

#### **Joint Commission Certified Programs:**

- Joint Replacement Hip
- Joint Replacement Knee

#### **Services:**

- Cardiac Catheterization Lab (Surgical Services)
- CT Scanner (Imaging/Diagnostic Services)
- Dialysis Unit (Inpatient)
- Ear/Nose/Throat Surgery (Surgical Services)
- EEG/EKG/EMG Lab (Imaging/Diagnostic Services)
- Gastroenterology (Surgical Services)
- General Laboratory Tests
- GI or Endoscopy Lab (Imaging/Diagnostic Services)
- Gynecological Surgery (Surgical Services)
- Hazardous Medication Compounding (Inpatient)
- Inpatient Unit (Inpatient)
- Interventional Radiology (Imaging/Diagnostic Services)
- Magnetic Resonance Imaging (Imaging/Diagnostic Services)
- Medical /Surgical Unit (Inpatient)
- Medical ICU (Intensive Care Unit)
- Non-Sterile Medication Compounding (Inpatient)

- Nuclear Medicine (Imaging/Diagnostic Services)
- Orthopedic Surgery (Surgical Services)
- Orthopedic/Spine Unit (Inpatient)
- Plastic Surgery (Surgical Services)
- Positron Emission Tomography (PET) (Imaging/Diagnostic Services)
- Post Anesthesia Care Unit (PACU) (Inpatient)
- Radiation Oncology (Imaging/Diagnostic Services)
- Sleep Laboratory (Sleep Laboratory)
- Sterile Medication Compounding (Inpatient)
- Surgical ICU (Intensive Care Unit)
- Teleradiology (Imaging/Diagnostic Services)
- Thoracic Surgery (Surgical Services)
- Toxicology
- Ultrasound (Imaging/Diagnostic Services)
- Urology (Surgical Services)
- Vascular Surgery (Surgical Services)

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# **Locations of Care**

#### \* Primary Location

## **Locations of Care**

## **Metro Knoxville HMA**

DBA: Turkey Creek Medical Center 10820 Parkside Drive Knoxville, TN 37934

#### **Available Services**

#### **Joint Commission Advanced Certification Programs:**

• Acute Stroke Ready Hospital

#### **Joint Commission Certified Programs:**

- Joint Replacement Hip
- Joint Replacement Knee

#### **Services:**

- Brachytherapy (Imaging/Diagnostic Services)
- Cardiac Catheterization Lab (Surgical Services)
- Cardiac Surgery (Surgical Services)
- Cardiothoracic Surgery (Surgical Services)
- Cardiovascular Unit (Inpatient)
- CT Scanner (Imaging/Diagnostic Services)
- Dialysis Unit (Inpatient)
- Ear/Nose/Throat Surgery (Surgical Services)
- EEG/EKG/EMG Lab (Imaging/Diagnostic Services)
- Gastroenterology (Surgical Services)
- GI or Endoscopy Lab (Imaging/Diagnostic Services)
- Gynecological Surgery (Surgical Services)
- Inpatient Unit (Inpatient)
- Interventional Radiology (Imaging/Diagnostic Services)
- Magnetic Resonance Imaging (Imaging/Diagnostic Services)
- Medical /Surgical Unit (Inpatient)
- Medical ICU (Intensive Care Unit)

- Neurosurgery (Surgical Services)
- Non-Sterile Medication Compounding (Inpatient)
- Nuclear Medicine (Imaging/Diagnostic Services)
- Ophthalmology (Surgical Services)
- Orthopedic Surgery (Surgical Services)
- Orthopedic/Spine Unit (Inpatient)
- Plastic Surgery (Surgical Services)
- Post Anesthesia Care Unit (PACU) (Inpatient)
- Radiation Oncology (Imaging/Diagnostic Services)
- Sleep Laboratory (Sleep Laboratory)
- Sterile Medication Compounding (Inpatient)
- Surgical ICU (Intensive Care Unit)
- Teleradiology (Imaging/Diagnostic Services)
- Thoracic Surgery (Surgical Services)
- Ultrasound (Imaging/Diagnostic Services)
- **Urology (Surgical Services)**
- Vascular Surgery (Surgical Services)

# **Metro Knoxville HMA**

DBA: The Birthing Center at North Knoxville Medical

Center 7557A Dannaher Drive, Suite 120 Powell, TN 37849

#### **Services:**

- · General Laboratory Tests
- Inpatient Unit (Inpatient)
- Labor & Delivery (Inpatient)
- Normal Newborn Nursery (Inpatient)

# LLC

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# **Locations of Care**

*	Primary	Location
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Locations of Care	Available Services
Tennova Ambulatory Care Center South 7323 Chapman Highway, Suite 190 Knoxville, TN 37920	Services:  • Outpatient Clinics (Outpatient)
Tennova Physical Therapy and Sports Medicine North 7540 Dannaher Drive, Suite 200 Powell, TN 37849	Services:  • Outpatient Clinics (Outpatient)
Tennova Sleep Center North 7557A Dannaher Drive, Suite 240 Powell, TN 37849	Services:  • Outpatient Clinics (Outpatient)
Tennova Sleep Center West 10800 Parkside Drive, Suite 202 Knoxville, TN 37934	Services:  • Outpatient Clinics (Outpatient)
Tennova Surgery Center West 10800 Parkside Drive, Suite 101 Knoxville, TN 37934	Services:

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# **2023 National Patient Safety Goals**

### Symbol Key

The organization has met the National Patient Safety Goal.

The organization has not met the National Patient Safety Goal.

The Goal is not applicable for this organization.

For further information and explanation of the Quality Report contents, refer to the "Quality Report User Guide."

# Hospital

Safety Goals	Organizations Should	Implemented
Improve the accuracy of patient identification.	Use of Two Patient Identifiers	Ø
Improve the effectiveness of communication among caregivers.	Timely Reporting of Critical Tests and Critical Results	Ø
Improve the safety of using medications.	Labeling Medications	Ø
	Reducing Harm from Anticoagulation Therapy	Ø
	Reconciling Medication Information	Ø
Reduce the harm associated with clinical alarm systems.	Use Alarms Safely on Medical Equipment	Ø
Reduce the risk of health care-associated infections.	Meeting Hand Hygiene Guidelines	Ø
The organization identifies safety risks inherent in its patient population.	Identifying Individuals at Risk for Suicide	Ø
Universal Protocol	Conducting a Pre-Procedure Verification Process	Ø
	Marking the Procedure Site	$\mathbf{O}$
	Performing a Time-Out	Ø

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# **National Quality Improvement Goals**

### Reporting Period: January 2021 - December 2021

**Accredited Organizations** Measure Area Statewide Explanation Nationwide Perinatal Care This category of evidenced based measures assesses the care of mothers and newborns.

		Соі	npared to c			n
			Accredit Nationwide	ed Organiz		wide
Measure	Explanation	Hospital	Top	Average	Top	Average
Weasure	Explanation	Results	Perform	Rate:	Perform	Rate:
			er		er	
			Threshol		Threshol	
			d:		d:	
Cesarean Birth	This measure reports the number of					
	first-time moms with a full-term, single baby in a head-down position	<b>(</b>	N/D 12	26%	N/D 12	26%
	who delivered the baby by cesarean			2070		2070
	section.					
Elective Delivery	This measure reports the overall					
•	number of mothers who had elective					
	vaginal deliveries or elective					
	cesarean sections at equal to and greater than 37 weeks gestation to					
	less than 39 weeks gestation. An					
	elective delivery is the delivery of a	0% of	0%	2%	0%	2%
	newborn(s) when the mother was not	34 eligible Patients				
	in active labor or presented with	, anomo				
	spontaneous ruptured membranes prior to medical induction and/or					
	cesarean section.					
Exclusive Breast Milk Feeding	This measure reports the overall					
Exclusive Breast William Pesaling	number of newborns who are					
	exclusively breast milk fed during the	Ø				
	newborns entire hospitalization.	O	740/	400/	<b>500</b> /	000/
	Exclusive breast milk feeding is when a newborn receives only breast milk	46% of	71%	49%	53%	33%
	and no other liquids or solids except	170 eligible Patients				
	for drops or syrups consisting of					
	vitamins, minerals, or medicines.					
Unexpected Complications in	The severe rate equals the number	$\oplus$				
Term Newborns per 1000	of patients with severe complications.		5	13	7	18
livebirths - Severe Rate		22 per 1000				

This information can also be viewed at https://hospitalcompare.io/ Null value or data not displayed.

- Symbol Kev
- This organization achieved the best ossible results
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- ot displayed

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Compared to other Joint

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# **2022 National Patient Safety Goals**

### Symbol Key

The organization has met the National Patient Safety Goal.

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The Goal is not applicable for this organization.

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# Laboratory

Safety Goals	Organizations Should	Implemented
Improve the accuracy of patient identification.	Use of Two Patient Identifiers	Ø
Improve the effectiveness of communication among caregivers.	Timely Reporting of Critical Tests and Critical Results	Ø
Reduce the risk of health care-associated infections	Meeting Hand Hygiene Guidelines	Ø